24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 76 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
	G 000404207
Check If 24-hour report	on Mam / Dad / Yayayay
Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group	Date
·	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2001 N. Beauregard Street	
Suite 420	Amount
City State Zip Code	400.00
	Transaction ID : D461777
Flier Production	e Sought: House State:
Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	Y President
Willard Mitt Romney Chec	k One: Support 🔀 Oppose
Calendar Year-To-Date Per Election	ursement For: Primary General
for Office Sought 861859.01 2012	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mosaic	M M / D D / Y Y Y Y
Mailing Address 4801 Viewpoint Place	10 11 2012
Walling Address 4801 Viewpoint Place	Amount
City State Zip Code	
Cheverly MD 20781	22.50
Office III	Transaction ID : D463217 Sought: House State: FL
Fliers Category/ Type 004	Senate
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: CONNIE MACK Chec	sk One: Support X Oppose
204825 57 2012	ursement For: Primary General
for Office Sought	Other (specify)
•	
(a) SUBTOTAL of Itemized Independent Expenditures	422.50
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
, and the second se	7 7
(c) TOTAL Independent Expenditures	
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler	M / D D / V - V - V
[Electronically Filed] Date 10) 13 2012
Signature	